

United States of America  
Department of Transportation — Federal Aviation Administration  
**Supplemental Type Certificate**

*Number* SA1540SW

Project T2900SW-S  
RTW-212

*This certificate, issued to* Ward International Aircraft Services, Inc.  
Location 2 West  
Meacham Field  
Fort Worth, Texas 76106

*certifies that the change in the type design for the following product with the limitations and conditions therefor as specified hereon meets the airworthiness requirements of Part 4b of the Civil Air Regulations.*

*Original Product — Type Certificate Number:* 7A1  
*Make:* Fairchild  
*Model:* F-27

*Description of Type Design Change:* Installation of Lavatory according to Drawing WA00104, Sheets 1 through 3, dated 10/26/72; Process Specs PS-005 dated 1/14/74, PS-010 dated 1/14/74, and PS-011 dated 1/17/74.

*Limitations and Conditions:*

*This certificate and the supporting data which is the basis for approval shall remain in effect until surrendered, suspended, revoked, or a termination date is otherwise established by the Administrator of the Federal Aviation Administration.*

*Date of application:* October 19, 1972

*Date reissued:* February 7, 1974

*Date of issuance:* November 10, 1972

*Date amended:*



*By direction of the Administrator*

*Don P. Watson*

(Signature)

Glen W. Welsh  
Chief, Engineering and Manufacturing Branch

(Title)

*Any alteration of this certificate is punishable by a fine of not exceeding \$1,000, or imprisonment not exceeding 3 years, or both.*

*This certificate may be transferred in accordance with FAR 21.47.*

INSTRUCTIONS: The transfer endorsement below may be used to notify the appropriate FAA Regional Office of the transfer of this Supplemental Type Certificate.

The FAA will reissue the certificate in the name of the transferee and forward it to him.

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### TRANSFER ENDORSEMENT

Transfer the ownership of Supplemental Type Certificate Number \_\_\_\_\_

to *(Name of transferee)* \_\_\_\_\_

*(Address of transferee)* \_\_\_\_\_

*(Number and street)*

\_\_\_\_\_  
*(City, State, and ZIP code)*

from *(Name of grantor)* *(Print or type)* \_\_\_\_\_

*(Address of grantor)* \_\_\_\_\_

*(Number and street)*

\_\_\_\_\_  
*(City, State, and ZIP code)*

Extent of Authority (if licensing agreement): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date of Transfer: \_\_\_\_\_

Signature of grantor *(In ink)*: \_\_\_\_\_